



## NCHS Data on Adolescent Health

### About NCHS

The CDC's National Center for Health Statistics (NCHS) is the nation's principal health statistics agency, providing data to identify and address health issues. NCHS compiles statistical information to help guide public health and health policy decisions.

Collaborating with other public and private health partners, NCHS employs a variety of data collection mechanisms to obtain accurate information from multiple sources. This process provides a broad perspective to help us understand the population's health, influences on health, and health outcomes.

### Adolescent Health

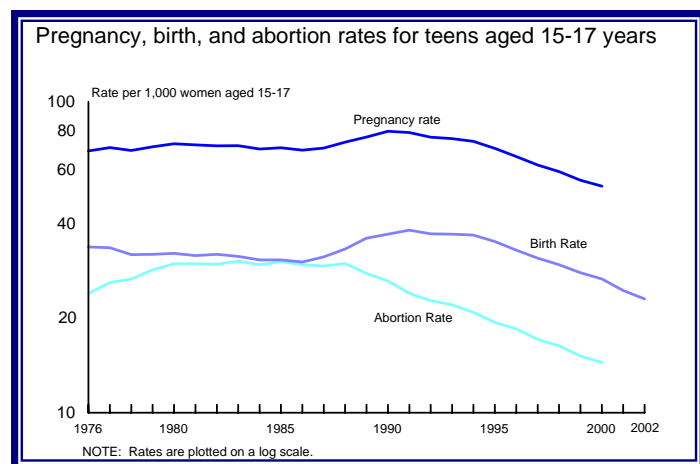
Birth statistics for the Nation show a continued decline in the adolescent birth rate, with the sharpest drop in births among African-American adolescents.

In 2003, statistics show that the adolescent birth rate dropped 33 percent below the most recent peak in 1991 (61.8 percent) to a historic low and that the rate for black adolescents was down by more than 45 percent. For young black adolescents (15 to 17 years) the results were even more striking—the rate was cut 55 percent since 1991.

The declines in adolescent pregnancy over the past decade have been much steeper for younger than for older adolescents. The pregnancy rate for adolescents 15-17 years fell a third from 1990 to 2000, from 80.3 to 53.5 per 1,000 15-17 year old females. The rate for older adolescents dropped one-fifth,

from 162.4 to 129.9. The rates in 2000 for each age group were also record lows for the Nation.

Estimates of pregnancy rates are also available for the youngest adolescents, under 15 years. The rate for this group (10-14 years) has fallen as well from its 1990 peak of 3.5 per 1,000 to 2.1 in 2000.



Sources: Estimated pregnancy rates for the United States, 1990-2000: An update. National Vital Statistics Reports, vol 52, no. 23. 2004. Births: Final Data for 2002. National Vital Statistics Reports, vol 52, no. 10. 2003.

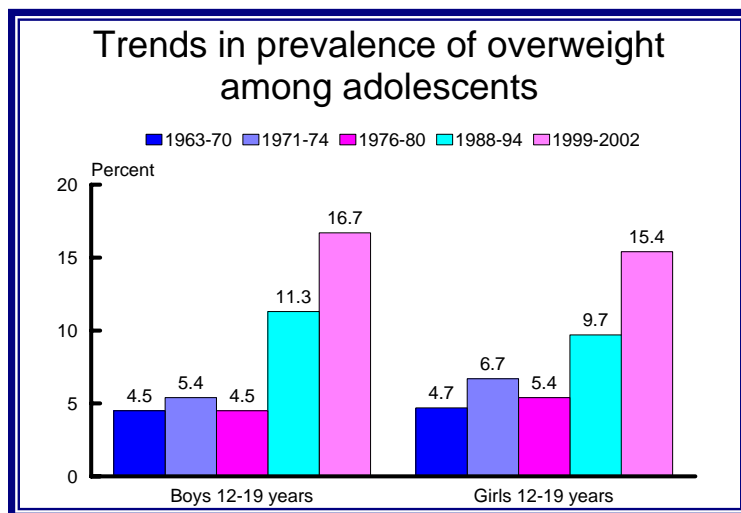
### Mortality

- In 2003, the death rate for adolescents ages 15-19 was 65.3 deaths per 100,000. Overall, the rate has declined substantially since 1980 (98 deaths per 100,000), despite a period of increase between 1986 and 1991. Injury, which includes homicide, suicide and unintentional injuries, continues to account for more than 3 of 4 deaths among adolescents.
- Injuries from motor vehicles and firearms are the primary causes of death among adolescents. In 2003, motor vehicle traffic-related injuries accounted for 25.5 of the 68 deaths per 100,000 youths ages 15-19 (38 percent) while firearm injuries accounted for 11.7 of the 68 deaths per 100,000 youths ages 15-19 (18 percent).

## Prevalence of Overweight Adolescents on the Rise

Data from the National Health and Nutrition Examination Survey show a significant increase in the prevalence of overweight among adolescents 12-19 years of age since 1963.

- Estimates of the prevalence of overweight among adolescents 12-19 years of age increased from 5 percent in 1963-1970 to 16.1 percent in 1999-2002.
- The prevalence of overweight among boys in this age group increased from 11.3 percent in 1988-1994 to 16.7 percent in 1999-2002. The prevalence among girls increased from 9.7 percent to 15.4 percent for the same time period.
- In 1999-2002, the prevalence of overweight non-Hispanic black (17.9 percent) and Mexican American adolescents (25.5 percent) was higher than non-Hispanic white adolescents (14.3 percent).



SOURCE: NHES II & III, NHANES I, II, & III, NHANES 1999-2002; Ogden et al. JAMA 2002; Hedley et al. JAMA 2004

## Other Adolescent Health Facts

- In 2003, 93 percent of adolescents 12-17 years of age had a usual place of health care.
- In 2003, 53 percent of adolescents 12-17 years of age were reported to be in excellent health; 28 percent were reported to be in very good health; 17 percent were reported to be in good health and 2 percent were reported to be in fair or poor health.
- In 2003, 17 percent of adolescents 12-17 years of age had taken prescription medication regularly for at least 3 months.

## Adolescent Health Data Sources

NCHS employs a variety of data collection mechanisms to obtain accurate information from multiple sources. They include:

- **National Health and Nutrition Examination Survey (NHANES)** – collects information about the health and diet of people in the United States. NHANES is unique in that it combines a home interview with health tests that are conducted in a Mobile Examination Center. NHANES is able to directly measure conditions where there are large race/ethnicity differentials such as diabetes, and to provide reliable information on health conditions regardless of whether the survey respondent is aware of them. (<http://www.cdc.gov/nchs/nhanes.htm>)
- **National Vital Statistics System** - collects information from birth and death certificates in all 50 states and the District of Columbia, including detailed race/ethnicity characteristics. Because all births and deaths are part of this database, it provides the detail needed for research on differentials. (<http://www.cdc.gov/nchs/nvss.htm>)
- **National Health Interview Survey (NHIS)** – collects information on the nation's health status through confidential household interviews that measure: health status and disability, insurance coverage, access to care, use of health services, immunizations, health behaviors, injury, and the ability to perform daily activities. The large sample size of the NHIS, combined with detailed categories on race/ethnicity collected, make the NHIS a valuable source of data on differentials. (<http://www.cdc.gov/nchs/nhis.htm>)

For further information about NCHS and its programs, visit us at <http://www.cdc.gov/nchs>, or call at 1-866-441-NCHS

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